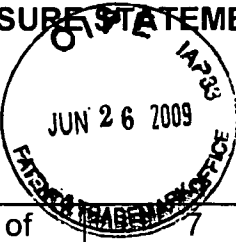


Subst. for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Complete if Known	
				Application Number	10/789,817
				Filing Date	02/24/2004
				First Named Inventor	John Babish
				Art Unit	1617
				Examiner Name	Carter, Kendra D
Sheet	2	of	7	Docket Number	068911-0074
U.S. PATENT DOCUMENTS CONT.					
EXAMINER'S INITIALS	CITE NO.	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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EXAMINER			DATE CONSIDERED		

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1 Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /K.C./

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U.S. PATENT DOCUMENTS					
EXAMINER'S INITIALS	CITE NO.	Document Number Number-Kind Codez (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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EXAMINER			DATE CONSIDERED		

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